



# Statement of Change in the particulars registered by an **Firm** and date of change

As required by Section 8 of the  
Business Names Registration Act

**Fee - £15**

Please insert Business Name Number below:  
(Include an \* immediately before and after the number)

**Business Name  
Registration No.** \_\_\_\_\_

**Business  
Name**

## **IMPORTANT INFORMATION**

Any change, such as, a change to the business name or address, a change in nature of the business, the addition of a new partner etc. must be notified to the Registrar within 14 days of the date of change.

The following documents are usually required with this form:

- Official document(s) evidencing the change. For example, for a change of name of any of the proprietors of the business name - I.D. card or passport is required (if an individual), if a corporate entity not incorporated in Gibraltar, a certified copy of the Certificate of Change of Name (or equivalent).
- For a change of address of any of the proprietors of the business name - proof of address of the proprietors (e.g. a recent utility bill – not more than three months old).
- For a change to the Principal Place of Business - Proof of 'right to use' the address where business is stated to be located or trading from (e.g. utility bill, a lease or tenancy/rental agreement or a letter from the persons in control of that address authorising the use of their address for commercial purposes).
- To include additional proprietors, in the case of individuals, their I.D. card or passport. If corporate entities not incorporated in Gibraltar, a certified copy of the Certificate(s) of Incorporation (or equivalent).
- For any other change – any supporting evidence to the satisfaction of the Registrar.

For further information please refer to our Circular No. 27. <http://www.companieshouse.gi/publications/C0027.pdf>

**Presented for  
registration by**

Name

\_\_\_\_\_

ID Card / Passport N°.

\_\_\_\_\_

Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tel No:

\_\_\_\_\_

Email

\_\_\_\_\_

To: The Registrar of Business Names  
Companies House Gibraltar  
1<sup>st</sup> Floor, The Arcade  
30-38 Main Street  
P.O. Box 848  
GX11 1AA  
Gibraltar

Business Names Registration Act  
Section 8

FORM R.B.N. 3B  
£15.00

**Statement of Change** in the particulars registered  
by a **Firm** and date of change

The following is a Statement of change (and of the date of such change) which has been made or has occurred in the particulars registered in respect of:-

**Registration Number :** \_\_\_\_\_

**Business Name :** \_\_\_\_\_

**(Insert nature of change)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(Insert date of change)** \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

**Signature** \_\_\_\_\_ (See note A)

**Name (in full)** \_\_\_\_\_

**Capacity (if applicable)** \_\_\_\_\_  
(Director / Secretary)

**Signature** \_\_\_\_\_ (See note A)

**Name (in full)** \_\_\_\_\_

**Capacity (if applicable)** \_\_\_\_\_  
(Director / Secretary)

**Dated this** \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

**Signature** \_\_\_\_\_ (See note A)

**Name (in full)** \_\_\_\_\_

**Capacity (if applicable)**  
**(Director / Secretary)** \_\_\_\_\_

**Signature** \_\_\_\_\_ (See note A)

**Name (in full)** \_\_\_\_\_

**Capacity (if applicable)**  
**(Director / Secretary)** \_\_\_\_\_

**Signature** \_\_\_\_\_ (See note A)

**Name (in full)** \_\_\_\_\_

**Capacity (if applicable)**  
**(Director / Secretary)** \_\_\_\_\_

**Signature** \_\_\_\_\_ (See note A)

**Name (in full)** \_\_\_\_\_

**Capacity (if applicable)**  
**(Director / Secretary)** \_\_\_\_\_

**Signature** \_\_\_\_\_ (See note A)

**Name (in full)** \_\_\_\_\_

**Capacity (if applicable)**  
**(Director / Secretary)** \_\_\_\_\_

**Dated this** \_\_\_\_\_ **day of** \_\_\_\_\_ **20** \_\_\_\_\_

**Note A:** - This Statement must be signed by either,

(a) by all the individuals who are Partners, and by a Director or Secretary of any Corporation which is a Partner, or (b) (1) by some individual who is a Partner.

(2) by a Director or Secretary of some Corporation which is a Partner, and in either cases (b) (1) and (2) must be verified by a Statutory Declaration made by the signatory.

This Statement, when signed must be sent by post or delivered to the Registrar within fourteen days after any change in any of the particulars registered or within such longer period as the Governor may, on application being made in any particular, case, whether before or after the expiration of such fourteen days, allow.

Failure without reasonable excuse, to furnish the required Statement of any change in the particulars registered within the time specified will, in addition to any disability imposed by the Act, entail liability on conviction to a fine not exceeding £5 for every day during which the default continues and any statement which contains any matter which is false in any material particular to the knowledge of any person signing it will entail liability on conviction to imprisonment, with or without hard labour, for a term not exceeding three months or to a fine not exceeding £20 or to both.

**Confirmation of business address:**

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***The Office of Fair Trading will not grant a Business Licence to any business that operates from a residential Government premises, or from non-Governmental premises under which the terms of the title deeds restrict commercial activities to be carried on from such premises and therefore no Business Name will be registered where it states that it operates from such an address.***

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I confirm that the address that I have provided in my application for registration / renewal of a business name as the “principal place of business address” is not a residential Government premises or a non-Governmental premises under which the terms of the title deeds restrict commercial activities to be carried on from such premises.

Signature: \_\_\_\_\_

Full name: \_\_\_\_\_

Date: \_\_\_\_\_

***If the nature of your business does not require premises from which to operate you may apply for a premises waiver to the Business Licencing Authority under Section 60(9) of the Fair Trading Act 2015 and give instead your postal address.***

I confirm that I will be applying for a premises waiver and that the postal address for the business will be the following:

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Signature: \_\_\_\_\_

Full name: \_\_\_\_\_

Date: \_\_\_\_\_